

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street)

2800 Shirlington Road, Suite 930

Check if different
than previously
reported. (ACC)

Arlington

VA

22206

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00325076

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Quarterly Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

1 1

2 3

2 0 1 0

through

1 2

3 1

2 0 1 0

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dorie Velezis

Signature of Treasurer

Electronically Filed by Dorie Velezis

Date

0 1

3 1

2 0 1 1

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 142

Write or Type Committee Name
CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	1942798.34
(b) Cash on Hand at Beginning of Reporting Period	1207591.04	
(c) Total Receipts (from Line 19)	37411.90	793132.34
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1245002.94	2735930.68
7. Total Disbursements (from Line 31)	77391.36	1568319.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1167611.58	1167611.58
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	2544.01	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	12851.67	432845.90
(ii) Unitemized	5523.26	239905.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	18374.93	672750.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	715.61	715.61
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	19090.54	673466.51
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	648.28
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	71.36	12017.55
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	18250.00	107000.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	18250.00	107000.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	37411.90	793132.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	19161.90	686132.34

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	18250.00	106750.00	
(ii) Non-Federal Share.....	18250.00	106750.00	
(b) Other Federal Operating Expenditures.....	40791.36	219066.99	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	77291.36	432566.99	
22. Transfers to Affiliated/Other Party Committees.....	100.00	100.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	68500.00	
24. Independent Expenditure (use Schedule E)	0.00	959327.11	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	5825.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	5825.00	
29. Other Disbursements.....	0.00	102000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	77391.36	1568319.10	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59141.36	1461569.10	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	19090.54	673466.51
34. Total Contribution Refunds (from Line 28(d))	0.00	5825.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19090.54	667641.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	59041.36	325816.99
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	648.28
38. Net Operating Expenditures (subtract Line 37 from Line 36)	59041.36	325168.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR CHARLES D AYRES

Mailing Address 4911 CASA ORO DR

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.48830

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

DAVID BAIN

Mailing Address 1000 PECAN DR

City

MCKINNEY

State

TX

Zip Code

75069

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORWIN ENGINEERING INCORPORATED

Occupation
ENGINEER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48769

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR. DAVID J BATLUCK

Mailing Address 17 MULLIGAN DR

City

READING

State

PA

Zip Code

19606

FEC ID number of contributing
federal political committee.

C

Name of Employer
ST. JOSEPH MEDICAL CENTER

Occupation
PHYSICIAN

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.48624

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0103804-0000232
Transaction ID : **SA11AI.48830**

B. Form/Schedule : **SA11AI** 0104630-0000167
Transaction ID : **SA11AI.48769**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48624**

0002355-0000015

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR. DAVID J BATLUCK

Mailing Address 17 MULLIGAN DR

City

READING

State

PA

Zip Code

19606

FEC ID number of contributing
federal political committee.

C

Name of Employer

ST. JOSEPH MEDICAL CENTER

Occupation

PHYSICIAN

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48625

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR ANTHONY R BIANCHI

Mailing Address 601 HACKBERRY RIDGE DR

City

MCKINNEY

State

TX

Zip Code

75070

FEC ID number of contributing
federal political committee.

C

Name of Employer

REMAX

Occupation

REALTOR

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.48770

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

DR GARY R BISHOP

Mailing Address 15144 LARRY ST

City

POWAY

State

CA

Zip Code

92064

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIVERSIDE COUNTY

Occupation

PHARMACIST

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48812

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0002355-0000016
Transaction ID : **SA11AI.48625**

B. Form/Schedule : **SA11AI** 0108760-0000168
Transaction ID : **SA11AI.48770**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48812**

0009108-0000212

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
MR JODY R BISHOP

Mailing Address **110 SUPERIOR DR UNIT H**

City State Zip Code
MOORESVILLE NC 28117

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
200.04

Date of Receipt

12 / 06 / 2010

Transaction ID: SA11AI.48634

Amount of Each Receipt this Period

16.67

B.

Full Name (Last, First, Middle Initial)
MR KENNETH N BLACKBURN

Mailing Address **10 SHALLOWBROOK DR**

City State Zip Code
O FALLON IL 62269

FEC ID number of contributing
federal political committee.

C

Name of Employer
AIRTRAN AIRWAYS

Occupation
PILOT

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
2295.00

Date of Receipt

12 / 20 / 2010

Transaction ID: SA11AI.48743

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MRS RONDA R BLEHM-KUK

Mailing Address **32265 WEEPING WILLOW ST**

City State Zip Code
TRABUCO CANYON CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

12 / 17 / 2010

Transaction ID: SA11AI.48827

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

216.67

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0102021-0000026
Transaction ID : **SA11AI.48634**

B. Form/Schedule : **SA11AI** 0014063-0000141
Transaction ID : **SA11AI.48743**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48827**

0104766-0000229

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 15 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR MARC E BOUCHER

Mailing Address 4130 RUSKIN ST

City

HOUSTON

State

TX

Zip Code

77005

FEC ID number of contributing
federal political committee.

C

Name of Employer
HERMES ARCHITECTS/VERITAS
CHRISTIAN

Occupation

ARCHITECT/RN

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.48780

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR MARC E BOUCHER

Mailing Address 4130 RUSKIN ST

City

HOUSTON

State

TX

Zip Code

77005

FEC ID number of contributing
federal political committee.

C

Name of Employer
HERMES ARCHITECTS/VERITAS
CHRISTIAN

Occupation

ARCHITECT/RN

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48781

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR TERRY O BRISTOL

Mailing Address 344 E FOOTHILLS PKWY
RED ROOM 9-W

City

FORT COLLINS

State

CO

Zip Code

80525

FEC ID number of contributing
federal political committee.

C

Name of Employer
344E FOOTHILLS PARKWAY FC
COLORADO

Occupation

ASSET MGR

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48797

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48780**

0104583-0000178

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48781**

0104583-0000179

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48797**

0024811-0000197

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 18 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR DEL C BROOKS

Mailing Address 12789 MUIRFIELD BLVD N

City

JACKSONVILLE

State

FL

Zip Code

32225

FEC ID number of contributing
federal political committee.

C

Name of Employer

SMURFIT STORE CONT. CORP

Occupation

GEN MGR

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.48649

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM P BUCK, JR

Mailing Address 2084 BROOK HIGHLAND RDG

City

BIRMINGHAM

State

AL

Zip Code

35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNIVERSITY OF ALABAMA

Occupation

MOM

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.48657

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS GREG K BURGER

Mailing Address 1209 AMANDA CT

City

EAU CLAIRE

State

WI

Zip Code

54703

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAU COUNTRY INSURANCE CO

Occupation

EXECUTIVE VP

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.48722

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0012784-0000040
Transaction ID : **SA11AI.48649**

B. Form/Schedule : **SA11AI** 0101854-0000049
Transaction ID : **SA11AI.48657**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48722**

0005868-0000120

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 21 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MRS G ELLENE BUSBY

Mailing Address 170 E CONNECTICUT AVE

City

SOUTHERN PNES

State

NC

Zip Code

28387

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48636

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR GORDON CHAN

Mailing Address 1023 NE 98TH ST

City

SEATTLE

State

WA

Zip Code

98115

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHWEST HOSP

Occupation
C. T. TECHNOLOGIST

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48859

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR BARTON L COMSTOCK

Mailing Address 3075 GRANGE RD

City

BERRIEN SPRINGS

State

MI

Zip Code

49103

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTHWESTERN MEDICAL CLIN-
IC

Occupation
PHYSICIAN

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.48699

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

575.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0003053-0000028
Transaction ID : **SA11AI.48636**

B. Form/Schedule : **SA11AI** 0032286-0000259
Transaction ID : **SA11AI.48859**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48699**

0073019-0000095

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
MR RONNIE C COSPER

Mailing Address **2536 FM 2136**

City State Zip Code
CLIFTON TX 76634

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIRST SEVURITY STATE BANK

Occupation
ACCOUNTANT

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

12 / 06 / 2010

Transaction ID: SA11AI.48777

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
MS DEBORAH R COWDEN

Mailing Address **3437 COUNTY ROAD 959**

City State Zip Code
LOUDONVILLE OH 44842

FEC ID number of contributing
federal political committee.

C

Name of Employer
JAMESTOWN FAMILY MEDICINE

Occupation
PHYSICIAN

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1535.00

Date of Receipt

12 / 23 / 2010

Transaction ID: SA11AI.48674

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
MR LEONARD A DEO

Mailing Address **2 SYLDEO DR**

City State Zip Code
PARSIPPANY NJ 07054

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLOWERS & GIFTS- INC.

Occupation
FLORIST

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

12 / 06 / 2010

Transaction ID: SA11AI.48615

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48777**

0050784-0000175

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48674**

0107701-0000067

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48615**

0001536-0000007

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

LETITIA DUBUSKY

Mailing Address 3922 US 42 RD

City

MANSFIELD

State

OH

Zip Code

44904

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48675

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR CRAIG W EGLOFF

Mailing Address 27001 HIGHWAY 128

City

YORKVILLE

State

CA

Zip Code

95494

FEC ID number of contributing
federal political committee.

C

Name of Employer

JAYMES & JAYMES

Occupation

INSURANCE BROKER

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1340.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.48841

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR CRAIG W EGLOFF

Mailing Address 27001 HIGHWAY 128

City

YORKVILLE

State

CA

Zip Code

95494

FEC ID number of contributing
federal political committee.

C

Name of Employer

JAYMES & JAYMES

Occupation

INSURANCE BROKER

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1380.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.48842

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

590.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0106276-0000069
Transaction ID : **SA11AI.48675**

B. Form/Schedule : **SA11AI** 0101847-0000243
Transaction ID : **SA11AI.48841**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48842**

0101847-0000244

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 142

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR WAYNE GARNER

Mailing Address 236 CROSS COUNTRY DRIVE

City

HEWITT

State

TX

Zip Code

76643

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
TEACHER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	1	0

Transaction ID: SA11AI.48778

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR DENNIS A GOLDENMAN

Mailing Address 2016 18TH AVE

City

MONROE

State

WI

Zip Code

53566

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE SWISS COLONY INCOccupation
ACCOUNTANT

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.48717

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR BEN J GOUGH

Mailing Address 13909 LAVERTON AVE

City

BAKERSFIELD

State

CA

Zip Code

93314

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFO REQUESTED- NOT RECDOccupation
INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	1	0

Transaction ID: SA11AI.48836

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0100558-0000176
Transaction ID : **SA11AI.48778**

B. Form/Schedule : **SA11AI** 0005789-0000116
Transaction ID : **SA11AI.48717**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48836**

0101216-0000238

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR JERRY GOULDING

Mailing Address PO BOX 8173

City

TRUCKEE

State

CA

Zip Code

96162

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

RETIRED BUILDING CONTRACTOR

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.48848

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS PHYLLIS L GUNTER

Mailing Address 12939 JULINGTON RIDGE DR E

City

JACKSONVILLE

State

FL

Zip Code

32258

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.48650

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MRS PHYLLIS L GUNTER

Mailing Address 12939 JULINGTON RIDGE DR E

City

JACKSONVILLE

State

FL

Zip Code

32258

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48651

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0103452-0000249
Transaction ID : **SA11AI.48848**

B. Form/Schedule : **SA11AI** 0107460-0000041
Transaction ID : **SA11AI.48650**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48651**

0107460-0000042

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MRS CARL W GUSTKE

Mailing Address 233 STATON RD

City

CABOT

State

AR

Zip Code

72023

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERAL EX - (WIFE) REBSA-
MEN R. H.

Occupation

PILOT - WIFE DEBORAH-RN

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48762

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS M SANDRA HEA

Mailing Address 5924 CHILDRESS AVE

City

SAINT LOUIS

State

MO

Zip Code

63109

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

REALTOR

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48747

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR BONNIE M HEATH, III

Mailing Address 7145 NW 125TH STREET RD

City

REDDICK

State

FL

Zip Code

32686

FEC ID number of contributing
federal political committee.

C

Name of Employer
BONNIE HEATH FARM- LLC

Occupation

THOROUGHBRED HORSE FARM OWNER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48652

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

575.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0022519-0000160
Transaction ID : **SA11AI.48762**

B. Form/Schedule : **SA11AI** 0106366-0000145
Transaction ID : **SA11AI.48747**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48652**

0103677-0000043

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
 MR JAMES W HEATH

Mailing Address PO BOX 578

City State Zip Code
CASCADE ID 83611

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CASCADE SCHOOLS

Occupation
 EDUCATOR

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.48801

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
 MR JAMES W HEATH

Mailing Address PO BOX 578

City State Zip Code
CASCADE ID 83611

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CASCADE SCHOOLS

Occupation
 EDUCATOR

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 325.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48802

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
 MR RICHARD HELMICK

Mailing Address 40 HALAULANI PL

City State Zip Code
HILO HI 96720

FEC ID number of contributing
federal political committee.

C

Name of Employer
 INFO REQUESTED- NOT RECD

Occupation
 INFO REQUESTED- NOT RECD

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.48849

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48801**

0102348-0000201

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48802**

0102348-0000202

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48849**

0031329-0000250

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL A HODGE

Mailing Address 610 PORTLAND LN

City

GALT

State

CA

Zip Code

95632

FEC ID number of contributing
federal political committee.

C

Name of Employer
ORGANIZATIONAL DEVELOPMENT
SERVICES

Occupation

SELF-EMPLOYED

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.48843

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR ALAN HOKANSON

Mailing Address 152 GRANDE VISTA WAY

City

CHELSEA

State

AL

Zip Code

35043

FEC ID number of contributing
federal political committee.

C

Name of Employer
CURRENTLY UNEMPLOYED

Occupation

SUPPLY CHAIN MANAGEMENT

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1663.24

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.48656

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

DARBY HOLSING

Mailing Address 1360 4TH AVE SW

City

LE MARS

State

IA

Zip Code

51031

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

CONSULTANT

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.48707

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48843**

0010944-0000245

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48656**

0105332-0000048

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48707**

0108768-0000104

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
DARBY HOLSING

Mailing Address **1360 4TH AVE SW**

City State Zip Code
LE MARS IA 51031

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
CONSULTANT

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

12 / 28 / 2010

Transaction ID: SA11AI.48708

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
MR TRUMAN HOMME

Mailing Address **PO BOX 156**

City State Zip Code
SPICER MN 56288

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFO REQUESTED- NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

12 / 07 / 2010

Transaction ID: SA11AI.48730

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MRS CHERYL HOWARD

Mailing Address **1306 TIMBERWOOD**

City State Zip Code
IRVINE CA 92620

FEC ID number of contributing
federal political committee.

C

Name of Employer
WOODBIDGE COMMUNITY CHURCH

Occupation
OFFICE MGR

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

12 / 08 / 2010

Transaction ID: SA11AI.48817

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0108768-0000105
Transaction ID : **SA11AI.48708**

B. Form/Schedule : **SA11AI** 0106511-0000128
Transaction ID : **SA11AI.48730**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48817**

0013904-0000218

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 142

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MRS CHERYL HOWARD

Mailing Address 1306 TIMBERWOOD

City

IRVINE

State

CA

Zip Code

92620

FEC ID number of contributing
federal political committee.

C

Name of Employer

WOODBIDGE COMMUNITY CHUR-

CH

Occupation

OFFICE MGR

Receipt For: 2010

☐ Primary ☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.48818

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT HOWARD

Mailing Address 1500 E ELK AVE

City

DUNCAN

State

OK

Zip Code

73533

FEC ID number of contributing
federal political committee.

C

Name of Employer

HALLIBURTON

Occupation

GLOBAL ADVISOR

Receipt For: 2010

☐ Primary ☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	1	0

Transaction ID: SA11AI.48764

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR CLAYTON L HOWIE

Mailing Address 1673 POPLAR LN

City

CAMANO ISLAND

State

WA

Zip Code

98282

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	1	0

Transaction ID: SA11AI.48861

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48818**

0013904-0000219

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48764**

0104509-0000162

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48861**

0100387-0000261

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MRS CYNTHIA HUENPFINER

Mailing Address 525 JACK LEG LN

City

BOZEMAN

State

MT

Zip Code

59715

FEC ID number of contributing
federal political committee.

C

Name of Employer
DICK WALTER AUTO CENTER

Occupation

SECRETARY/BOOKKEEPER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48735

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR ALDEN P JOHNSON

Mailing Address 5010 LA BARRANCA ST

City

SAN ANTONIO

State

TX

Zip Code

78233

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

MORTGAGE LOAN OFFICER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48787

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR FLOYD R JUMP

Mailing Address 350 E HENSCHEN ST

City

GARNER

State

IA

Zip Code

50438

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.48705

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48735**

0019234-0000133

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48787**

0104518-0000185

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48705**

0103497-0000103

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

DR JOHN D KEISLING

Mailing Address 35 ERICA LN

City

BELEN

State

NM

Zip Code

87002

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAIC

Occupation
SCIENTIST

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.48806

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MS BEVERLY H KENDAL

Mailing Address 1346 N CESAR CHAVEZ RD LOT 508

City

ALAMO

State

TX

Zip Code

78516

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFO REQUESTED- NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48789

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

KRISTI KEPLEY

Mailing Address 111 BENSON BLVD

City

MADISON

State

AL

Zip Code

35758

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOME

Occupation
RN/HOMEHAKER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.48659

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48806**

0100128-0000206

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48789**

0108282-0000187

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48659**

0107048-0000051

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR H KERKSTRA

Mailing Address 1711 TOURS CT

City

BAKERSFIELD

State

CA

Zip Code

93311

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.48835

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR CHRISTOPHER S KONING

Mailing Address 26 SCENIC BLF

City

NEWPORT BEACH

State

CA

Zip Code

92657

FEC ID number of contributing
federal political committee.

C

Name of Employer
KONIG & ASSOCIATES (SELF
EMPLOYED)

Occupation
PRESIDENT

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.48824

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

SHARRY KROUCH

Mailing Address 7412 MARION AVE

City

KANSAS CITY

State

MO

Zip Code

64133

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.48750

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

580.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0103362-0000237
Transaction ID : **SA11AI.48835**

B. Form/Schedule : **SA11AI** 0101710-0000223
Transaction ID : **SA11AI.48824**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48750**

0107040-0000148

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MRS SHIRLEY A LABARR, RET

Mailing Address 7306 S INDEPENDENCE ST

City State Zip Code
LITTLETON CO 80128

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48796

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT LAKE

Mailing Address 2721 18TH ST

City State Zip Code
BAKERSFIELD CA 93301

FEC ID number of contributing
federal political committee.

C

Name of Employer
 WESTERN OILFIELDS SUPPLY
 CO

Occupation
 CFO

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 550.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.48833

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT LAKE

Mailing Address 2721 18TH ST

City State Zip Code
BAKERSFIELD CA 93301

FEC ID number of contributing
federal political committee.

C

Name of Employer
 WESTERN OILFIELDS SUPPLY
 CO

Occupation
 CFO

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48834

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0104097-0000196
Transaction ID : **SA11AI.48796**

B. Form/Schedule : **SA11AI** 0009387-0000235
Transaction ID : **SA11AI.48833**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48834**

0009387-0000236

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

LEILA LANGSTON

Mailing Address 159 N SHAFFER ST

City

ORANGE

State

CA

Zip Code

92866

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
RETIRED

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.48829

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

ELDON R LARSEN

Mailing Address 2562 TREASURE DR

City

SANTA BARBARA

State

CA

Zip Code

93105

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFO REQUESTED- NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.48832

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

WANDA LATHROPE

Mailing Address 2029 PTARMIGAN DR #2

City

WALNUT CREEK

State

CA

Zip Code

94595

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIBERTY UNION HIGH SCHOOL
DIST.

Occupation
RETIRED/BUSINESS MGR/ HIGH SCHOOL D

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.48839

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0107770-0000231
Transaction ID : **SA11AI.48829**

B. Form/Schedule : **SA11AI** 0104916-0000234
Transaction ID : **SA11AI.48832**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48839**

0108766-0000241

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 142

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR STEVE J LIPPERT

Mailing Address 6829 JENNIFER LYNN DR

City

CINCINNATI

State

OH

Zip Code

45248

FEC ID number of contributing
federal political committee.

C

Name of Employer

HAMILTON CASTER & MFG. CO.

Occupation

BUSINESS

Receipt For: 2010

☐ Primary ☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.48677

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES LUDINGTON

Mailing Address 733 ASBURY RD

City

TROUTVILLE

State

VA

Zip Code

24175

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIBERTY UNIVERSITY

Occupation

HISTORIAN

Receipt For: 2010

☐ Primary ☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.48629

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MAJ JAMES P LUKE

Mailing Address 4273 BRISTOL DR

City

DAYTON

State

OH

Zip Code

45440

FEC ID number of contributing
federal political committee.

C

Name of Employer

USAF

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	1	0

Transaction ID: SA11AI.48679

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48677**

0104594-0000072

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48629**

0103409-0000020

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48679**

0101785-0000075

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 142

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MAJ JAMES P LUKE

Mailing Address 4273 BRISTOL DR

City

DAYTON

State

OH

Zip Code

45440

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary
☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	9	/	2	0	1	0

Transaction ID: SA11AI.48680

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM R MACCORMICK

Mailing Address 3201 ROYALTY ROW

City

IRVING

State

TX

Zip Code

75062

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRAWFORD BROADCASTING COM-
PANY

Occupation

BROADCASTER

Receipt For: 2010

☐ Primary
☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	7	/	2	0	1	0

Transaction ID: SA11AI.48767

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM R MACCORMICK

Mailing Address 3201 ROYALTY ROW

City

IRVING

State

TX

Zip Code

75062

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRAWFORD BROADCASTING COM-
PANY

Occupation

BROADCASTER

Receipt For: 2010

☐ Primary
☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.48768

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

A.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48680**

0101785-0000076

B.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48767**

0100551-0000165

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48768**

0100551-0000166

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 142

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

JANE R MARSH

Mailing Address 412 SHOSHONE AVE

City

NAMPA

State

ID

Zip Code

83651

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	1	0

Transaction ID: SA11AI.48803

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS MARY MATISOHN

Mailing Address 3240 MERCER LN

City

SAN DIEGO

State

CA

Zip Code

92122

FEC ID number of contributing
federal political committee.

C

Name of Employer
SDGE

Occupation

PROJECT PLANNER

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	1	0

Transaction ID: SA11AI.48813

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MRS LYNN MCCLATCHEY

Mailing Address 45012 70TH AVENUE

City

LINN GROVE

State

IA

Zip Code

51033

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIOUX CENTRAL SCHOOL

Occupation

TEACHER

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	1	0

Transaction ID: SA11AI.48709

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48803**

0103969-0000203

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48813**

0009018-0000213

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48709**

0023485-0000107

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
MAE L MCKINLEY

Mailing Address **515 11TH AVE NE**

City State Zip Code
MINOT ND 58703

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

12 / 06 / 2010

Transaction ID: SA11AI.48734

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MRS GWEN L MOORE

Mailing Address **1213 CHRISTINE AVE**

City State Zip Code
ANNISTON AL 36207

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

12 / 27 / 2010

Transaction ID: SA11AI.48661

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MRS ARTHA M NEUENFELDT

Mailing Address **637 ROBINSON RD**

City State Zip Code
JACKSON MI 49203

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
705.00

Date of Receipt

12 / 06 / 2010

Transaction ID: SA11AI.48700

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0101794-0000132
Transaction ID : **SA11AI.48734**

B. Form/Schedule : **SA11AI** 0001229-0000053
Transaction ID : **SA11AI.48661**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48700**

0103940-0000097

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

EDWARD M NICHOLS

Mailing Address 555 TAXTER RD

City

ELMSFORD

State

NY

Zip Code

10523

FEC ID number of contributing
federal political committee.

C

Name of Employer
FUSION FINANCIAL GROUP

Occupation

FINANCIAL PLANNER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.48618

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

EDWARD M NICHOLS

Mailing Address 555 TAXTER RD

City

ELMSFORD

State

NY

Zip Code

10523

FEC ID number of contributing
federal political committee.

C

Name of Employer
FUSION FINANCIAL GROUP

Occupation

FINANCIAL PLANNER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.48619

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR JAY R OWEN

Mailing Address 35 CYPRESS MARSH DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29926

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENGINEERED SYSTEMS

Occupation

ENGINEER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.48640

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

A.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48618**

0104421-0000010

B.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48619**

0104421-0000011

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48640**

0031336-0000031

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MARTIN PIERCE

Mailing Address 6401 COVE POINTE LANE

City

HIXSON

State

TN

Zip Code

37343

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

ATTORNEY

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48663

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR VAN T PITTMAN

Mailing Address 116 STONECREST RD

City

GREER

State

SC

Zip Code

29650

FEC ID number of contributing
federal political committee.

C

Name of Employer
L & L CONTAINER

Occupation

MANAGER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.48637

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

DR PAUL A RIGGS

Mailing Address 308 KEOMAH VLG

City

OSKALOOSA

State

IA

Zip Code

52577

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAHASKA HEALTH PARTNERSHIP

Occupation

SURGEON

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.48713

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

575.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0108770-0000055
Transaction ID : **SA11AI.48663**

B. Form/Schedule : **SA11AI** 0003199-0000029
Transaction ID : **SA11AI.48637**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48713**

0005704-0000111

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MRS KAREN E SCHUMACHER

Mailing Address PO BOX 737

122 HIGH STREET

City

TUSCARAWAS

State

OH

Zip Code

44682

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCHUMACHER INSURANCE SERV-
ICE

Occupation

INSURANCE AGENT

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.48673

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR GARY J SELF

Mailing Address 8508 YORKSHIRE DR

City

ORANGE

State

TX

Zip Code

77632

FEC ID number of contributing
federal political committee.

C

Name of Employer

WAL-MART

Occupation

PHARMACIST

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48784

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL V SERENIUS

Mailing Address 321 VILLAGE SQUARE DR

City

CENTERVILLE

State

OH

Zip Code

45458

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.48682

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0011538-0000066
Transaction ID : **SA11AI.48673**

B. Form/Schedule : **SA11AI** 0013298-0000182
Transaction ID : **SA11AI.48784**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48682**

0104852-0000078

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR WARREN SIMANDLE

Mailing Address 2322 VISTA MADERA

City

SANTA BARBARA

State

CA

Zip Code

93101

FEC ID number of contributing
federal political committee.

C

Name of Employer
SANTA BARBARA HIGH SCHOOL
DIST

Occupation

PUBLIC SCHOOL TEACHER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48831

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR RANDALL SKOV

Mailing Address 115 TALL TIMBER CT

City

FAYETTEVILLE

State

GA

Zip Code

30215

FEC ID number of contributing
federal political committee.

C

Name of Employer
US AIR FORCE

Occupation

WEATHER OFFICER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48643

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS DEBORAH E SMITH

Mailing Address 3360 E TERRELL BRANCH CT SE

City

MARIETTA

State

GA

Zip Code

30067

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48641

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0009367-0000233
Transaction ID : **SA11AI.48831**

B. Form/Schedule : **SA11AI** 0014942-0000034
Transaction ID : **SA11AI.48643**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48641**

0027760-0000032

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MRS LINDA C SMITH

Mailing Address 17618 REXWOOD ST

City

LIVONIA

State

MI

Zip Code

48152

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARBOR HOSPICE

Occupation
RN

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48692

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

DR WILLIAM H SMITH

Mailing Address PO BOX 203

City

KAAAWA

State

HI

Zip Code

96730

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF HAWAII

Occupation
TEACHER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.48850

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS SPIX

Mailing Address 1177 MILL VALLEY ST

City

ROCHESTER HLS

State

MI

Zip Code

48306

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
MECHANICAL ENGINEER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48693

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48692**

0038656-0000088

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.48850**

0103927-0000251

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48693**

0015501-0000089

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR PATRICK A SPRUNGER

Mailing Address 5915 HEYWOOD CV

City

FORT WAYNE

State

IN

Zip Code

46815

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIMPLEX

Occupation
GEN MGR

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.48689

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR PATRICK A SPRUNGER

Mailing Address 5915 HEYWOOD CV

City

FORT WAYNE

State

IN

Zip Code

46815

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIMPLEX

Occupation
GEN MGR

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48690

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS TAMMY E STEINBERG

Mailing Address 101 WINDINGHAM DR NW

City

HUNTSVILLE

State

AL

Zip Code

35806

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARRO APOTHERAPY

Occupation
HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48660

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0004939-0000085
Transaction ID : **SA11AI.48689**

B. Form/Schedule : **SA11AI** 0004939-0000086
Transaction ID : **SA11AI.48690**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48660**

0011951-0000052

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR STEPHEN STUDE

Mailing Address 32797 820TH ST

City

BREWSTER

State

MN

Zip Code

56119

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
FARMER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48728

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR MARK SWISHER

Mailing Address 24902 N POINT PL

City

KATY

State

TX

Zip Code

77494

FEC ID number of contributing
federal political committee.

C

Name of Employer
AVIARA ENERGY CORPORATION

Occupation
ENGINEER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48783

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

DEL TACKETT

Mailing Address 11830 COLUMBINE HILLS RD

City

COLORADO SPRINGS

State

CO

Zip Code

80908

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORAL RIDGE MINISTRIES

Occupation
SR. CORRESPONDENT AND HOST OF CROSS

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.48800

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0006116-0000126
Transaction ID : **SA11AI.48728**

B. Form/Schedule : **SA11AI** 0048257-0000181
Transaction ID : **SA11AI.48783**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48800**

0108769-0000199

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 142

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

CHERYL TURNER

Mailing Address W257S4373 SHADOW RIDGE DR

City

WAUKESHA

State

WI

Zip Code

53189

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: SA11AI.48715

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM WADELL

Mailing Address 300 N VAN HOOREBEKE RD

City

JOPLIN

State

MO

Zip Code

64801

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN REHABILITATION
MINISTRIES

Occupation

BUSINESS MANAGER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.48751

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM WADELL

Mailing Address 300 N VAN HOOREBEKE RD

City

JOPLIN

State

MO

Zip Code

64801

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN REHABILITATION
MINISTRIES

Occupation

BUSINESS MANAGER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	1	0

Transaction ID: SA11AI.48752

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0106259-0000114
Transaction ID : **SA11AI.48715**

B. Form/Schedule : **SA11AI** 0101631-0000149
Transaction ID : **SA11AI.48751**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48752**

0101631-0000150

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR DEAN WALHOF

Mailing Address 108 MICHIGAN AVE SW

City

ORANGE CITY

State

IA

Zip Code

51041

FEC ID number of contributing
federal political committee.

C

Name of Employer
WELLS DAIRY

Occupation

COMPUTER ENGINEER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.48710

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR MARK A WALKOTTEN

Mailing Address 3755 ACORN RIDGE CT NE

City

GRAND RAPIDS

State

MI

Zip Code

49525

FEC ID number of contributing
federal political committee.

C

Name of Employer
CROWE HORWORTH LLP

Occupation

CPA

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.48703

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MRS GLENDA WEATHERLY

Mailing Address PO BOX 1245

City

WHEELER

State

TX

Zip Code

79096

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.48792

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0106652-0000108
Transaction ID : **SA11AI.48710**

B. Form/Schedule : **SA11AI** 0014812-0000100
Transaction ID : **SA11AI.48703**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48792**

0102813-0000190

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
MR DOUG WERK

Mailing Address **177 PROMONTORY DR W**

City State Zip Code
NEWPORT BEACH CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
FUNDRAISER

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

12 / 31 / 2010

Transaction ID: SA11AI.48825

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
MRS CHRISTINE A WHITCOMB

Mailing Address **9609 PARKEDGE DR**

City State Zip Code
ALLISON PARK PA 15101

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

12 / 17 / 2010

Transaction ID: SA11AI.48620

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MRS DONALD A WHITE, JR

Mailing Address **9412 ROCKY HILLS DR**

City State Zip Code
CORDOVA TN 38018

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

12 / 13 / 2010

Transaction ID: SA11AI.48668

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0104822-0000225
Transaction ID : **SA11AI.48825**

B. Form/Schedule : **SA11AI** 0043620-0000012
Transaction ID : **SA11AI.48620**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48668**

0101707-0000061

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MRS WARD A WHITEMAN

Mailing Address 4007 NORWOOD STREET

City

MIDLAND

State

TX

Zip Code

79707

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONCHO RESOURCES

Occupation
GEOLOGIST

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.48794

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MRS LOIS WIERENGA

Mailing Address 3442 OLDERIDGE DR NE

City

GRAND RAPIDS

State

MI

Zip Code

49525

FEC ID number of contributing
federal political committee.

C

Name of Employer
GRAND RAPIDS PUBLIC SCHOOLS

Occupation
TEACHER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.48704

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR STEVEN E WINTER

Mailing Address 2104 BENTHAM WAY

City

YUKON

State

OK

Zip Code

73099

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAA / MUSTANG PUBLIC SCHOOLS

Occupation
RETIRED AVIATION SAFETY INSPECTOR /

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.48763

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI** 0059494-0000193
Transaction ID : **SA11AI.48794**

B. Form/Schedule : **SA11AI** 0005517-0000102
Transaction ID : **SA11AI.48704**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48763**

0007481-0000161

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MS JANICE E WOOD

Mailing Address 3946 HOLLADAY PARK LOOP SE

City

LACEY

State

WA

Zip Code

98503

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

RETIRED TEACHER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.48866

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

JUNE L ZEIGLER

Mailing Address 2261 WARREN DR

City

MORRISTOWN

State

TN

Zip Code

37814

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.48664

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MRS DONNA STRUNK ZIMMERMAN

Mailing Address 26566 QUEENWOOD RD

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.48740

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

12851.67

A. Form/Schedule : **SA11AI** 0101762-0000266
Transaction ID : **SA11AI.48866**

B. Form/Schedule : **SA11AI** 0098488-0000057
Transaction ID : **SA11AI.48664**

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.48740**

0106331-0000138

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 142

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

CECE FOR CONGRESS

Mailing Address 2817 ERICA PLACE

City

NASHVILLE

State

TN

Zip Code

37204

FEC ID number of contributing
federal political committee.**C**

C00481051

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

715.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	1	0

Transaction ID: SA11C.48940

Amount of Each Receipt this Period

715.61

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

715.61

TOTAL This Period (last page this line number only)

715.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 / 142

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
BB&T

Mailing Address P.O. Box 580363

City State Zip Code
Charlotte NC 28258

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1902.42

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 1 0

Transaction ID: SA17.48937

Amount of Each Receipt this Period

11.51

Interest Income

B.

Full Name (Last, First, Middle Initial)
BB&T

Mailing Address P.O. Box 580363

City State Zip Code
Charlotte NC 28258

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1913.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA17.48938

Amount of Each Receipt this Period

11.38

INTEREST INCOME

C.

Full Name (Last, First, Middle Initial)
BB&T

Mailing Address P.O. Box 580363

City State Zip Code
Charlotte NC 28258

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.27

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA17.48939

Amount of Each Receipt this Period

48.47

INTEREST INCOME

SUBTOTAL of Receipts This Page (optional)

71.36

TOTAL This Period (last page this line number only)

71.36

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 116 / 142

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

1st Virginia Community Bank

Mailing Address 11325 Random Hills Road

City State Zip Code
Fairfax VA 22030

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48878

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59.01

B.

Full Name (Last, First, Middle Initial)

1st Virginia Community Bank

Mailing Address 11325 Random Hills Road

City State Zip Code
Fairfax VA 22030

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48884

Date of Disbursement

/ /

Amount of Each Disbursement this Period

58.39

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 981540

City State Zip Code
El Paso TX 79998

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48872

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.95

SUBTOTAL of Disbursements This Page (optional)

122.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 117 / 142

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.48873
Mailing Address P.O. Box 981540	Date of Disbursement
City El Paso State TX Zip Code 79998	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
Purpose of Disbursement BANK FEES	Amount of Each Disbursement this Period
Candidate Name	<div>847.65</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.48876
Mailing Address P.O. Box 981540	Date of Disbursement
City El Paso State TX Zip Code 79998	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
Purpose of Disbursement BANK FEES	Amount of Each Disbursement this Period
Candidate Name	<div>1.60</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.48877
Mailing Address P.O. Box 981540	Date of Disbursement
City El Paso State TX Zip Code 79998	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
Purpose of Disbursement BANK FEES	Amount of Each Disbursement this Period
Candidate Name	<div>0.96</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

850.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 118 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 981540

City State Zip Code
El Paso TX 79998

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48879

Date of Disbursement

12 / 01 / 2010

Amount of Each Disbursement this Period

4.95

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 981540

City State Zip Code
El Paso TX 79998

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48882

Date of Disbursement

12 / 06 / 2010

Amount of Each Disbursement this Period

219.44

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 981540

City State Zip Code
El Paso TX 79998

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48885

Date of Disbursement

12 / 20 / 2010

Amount of Each Disbursement this Period

0.96

SUBTOTAL of Disbursements This Page (optional)

225.35

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

CAMPAIGN FOR WORKING FAMILIES

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

Authorize.net

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48881

Date of Disbursement

12 / 02 / 2010

Amount of Each Disbursement this Period

31.02

B.

Full Name (Last, First, Middle Initial)

BB&T

Mailing Address P.O. Box 580363

City Charlotte State NC Zip Code 28258

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48874

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

3324.86

C.

Full Name (Last, First, Middle Initial)

BB&T

Mailing Address P.O. Box 580363

City Charlotte State NC Zip Code 28258

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48883

Date of Disbursement

12 / 15 / 2010

Amount of Each Disbursement this Period

603.64

SUBTOTAL of Disbursements This Page (optional)

3959.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
CHOI COMPANIES

Mailing Address 5999 STEVENSON AVE #310

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement
PAC RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48895

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2756.00

B.

Full Name (Last, First, Middle Initial)
CHOI COMPANIES

Mailing Address 5999 STEVENSON AVE #310

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement
RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48924

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2774.00

C.

Full Name (Last, First, Middle Initial)
COVAD COMMUNICATIONS

Mailing Address P.O. BOX 39000

City SAN FRANCISCO State CA Zip Code 94139

Purpose of Disbursement
COMPUTER SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48915

Date of Disbursement

/ /

Amount of Each Disbursement this Period

114.18

SUBTOTAL of Disbursements This Page (optional)

5644.18

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 122 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
COVINGTON & BURLING

Mailing Address 1201 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20044

Purpose of Disbursement
PAC LEGAL FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48925

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1747.00

B.

Full Name (Last, First, Middle Initial)
DEER PARK

Mailing Address P.O. BOX 52271

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
OFFICE EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48896

Date of Disbursement

/ /

Amount of Each Disbursement this Period

26.23

C.

Full Name (Last, First, Middle Initial)
DEER PARK

Mailing Address P.O. BOX 52271

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
OFFICE EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48917

Date of Disbursement

/ /

Amount of Each Disbursement this Period

38.30

SUBTOTAL of Disbursements This Page (optional)

1811.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
DESIGN 4 INC.

Mailing Address 106 N. Collins Street

City State Zip Code
Plant City FL 33563

Purpose of Disbursement
PAC PRINTING & REPRODUCTION BUMPER STICKERS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.48903

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1460.00

B.

Full Name (Last, First, Middle Initial)
FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City State Zip Code
MEMPHIS TN 38101

Purpose of Disbursement
SHIPPING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.48899

Date of Disbursement

/ /

Amount of Each Disbursement this Period

211.84

C.

Full Name (Last, First, Middle Initial)
FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City State Zip Code
MEMPHIS TN 38101

Purpose of Disbursement
SHIPPING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.48918

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.95

SUBTOTAL of Disbursements This Page (optional)

1687.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 124 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City State Zip Code
MEMPHIS TN 38101

Purpose of Disbursement
SHIPPING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48926

Date of Disbursement

/ /

Amount of Each Disbursement this Period

48.51

B.

Full Name (Last, First, Middle Initial)
IRON MOUNTAIN

Mailing Address 745 ATLANTIC AVE

City State Zip Code
BOSTON MA 02111

Purpose of Disbursement
STORAGE FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48900

Date of Disbursement

/ /

Amount of Each Disbursement this Period

249.13

C.

Full Name (Last, First, Middle Initial)
IRON MOUNTAIN

Mailing Address 745 ATLANTIC AVE

City State Zip Code
BOSTON MA 02111

Purpose of Disbursement
STORAGE FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48919

Date of Disbursement

/ /

Amount of Each Disbursement this Period

249.13

SUBTOTAL of Disbursements This Page (optional)

546.77

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 125 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
LEXIS NEXIS

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
DUES & SUBSCRIPTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48901

Date of Disbursement

/ /

Amount of Each Disbursement this Period

350.00

B.

Full Name (Last, First, Middle Initial)
LEXIS NEXIS

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
DUES & SUBSCRIPTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48920

Date of Disbursement

/ /

Amount of Each Disbursement this Period

350.00

C.

Full Name (Last, First, Middle Initial)
LPS

Mailing Address P.O. BOX 2325

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
PAC DATA PROCESSING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48904

Date of Disbursement

/ /

Amount of Each Disbursement this Period

539.29

SUBTOTAL of Disbursements This Page (optional)

1239.29

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.48905 Date of Disbursement																				
Mailing Address P.O. BOX 2325	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	3		2	0	1	0												
City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC DATA PROCESSING SERVICES	<table border="1"> <tr> <td colspan="10">1167.66</td> </tr> </table>	1167.66																			
1167.66																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.48922 Date of Disbursement																				
Mailing Address P.O. BOX 2325	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	7		2	0	1	0												
City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC DATA PROCESSING SERVICE	<table border="1"> <tr> <td colspan="10">587.11</td> </tr> </table>	587.11																			
587.11																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.48934 Date of Disbursement																				
Mailing Address P.O. BOX 2325	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	8		2	0	1	0												
City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC DATA PROCESSING SERVICES	<table border="1"> <tr> <td colspan="10">52.41</td> </tr> </table>	52.41																			
52.41																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1807.18

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 127 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) OFFICE SHREDDERS	Transaction ID: SB21B.48906 Date of Disbursement																				
Mailing Address 6500 KANE WAY	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	3		2	0	1	0												
City ELKRIDGE State MD Zip Code 21075	Amount of Each Disbursement this Period																				
Purpose of Disbursement OFFICE EXPENSE	<table border="1"> <tr> <td>45.00</td> </tr> </table>	45.00																			
45.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) OFFICE SHREDDERS	Transaction ID: SB21B.48927 Date of Disbursement																				
Mailing Address 6500 KANE WAY	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	8		2	0	1	0												
City ELKRIDGE State MD Zip Code 21075	Amount of Each Disbursement this Period																				
Purpose of Disbursement OFFICE EXPENSE	<table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00																			
50.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) PENSION DESIGN GROUP	Transaction ID: SB21B.48928 Date of Disbursement																				
Mailing Address 7506 DIPLOMAT DRIVE SUITE 201	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	8		2	0	1	0												
City MANASSAS State VA Zip Code 20109	Amount of Each Disbursement this Period																				
Purpose of Disbursement PLAN FEES	<table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00																			
25.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

PR NEWSWIRE

Mailing Address 810 7TH AVE 32ND FL

City State Zip Code
 NEW YORK NY 10019

Purpose of Disbursement
 PAC MEDIA PRESS RELEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48907

Date of Disbursement

/ /

Amount of Each Disbursement this Period

195.00

B.

Full Name (Last, First, Middle Initial)

PR NEWSWIRE

Mailing Address 810 7TH AVE 32ND FL

City State Zip Code
 NEW YORK NY 10019

Purpose of Disbursement
 PAC MEDIA PRESS RELEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48908

Date of Disbursement

/ /

Amount of Each Disbursement this Period

125.00

C.

Full Name (Last, First, Middle Initial)

PR NEWSWIRE

Mailing Address 810 7TH AVE 32ND FL

City State Zip Code
 NEW YORK NY 10019

Purpose of Disbursement
 PAC MEDIA PRESS RELEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48909

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1430.00

SUBTOTAL of Disbursements This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) RST MARKETING	Transaction ID: SB21B.48910 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div><small>1</small> <small>1</small> / <small>2</small> <small>3</small> / <small>2</small> <small>0</small> <small>1</small> <small>0</small></div> </div>
Mailing Address P.O. BOX 228	
City FOREST	State VA
Zip Code 24551	
Purpose of Disbursement PAC DIRECT MAIL PRODUCTION	<div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	
Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 300px; height: 30px; margin: 0 auto; text-align: center; padding-top: 5px;">1481.75</div>	

B. Full Name (Last, First, Middle Initial) RST MARKETING	Transaction ID: SB21B.48929 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div><small>1</small> <small>2</small> / <small>2</small> <small>8</small> / <small>2</small> <small>0</small> <small>1</small> <small>0</small></div> </div>
Mailing Address P.O. BOX 228	
City FOREST	State VA
Zip Code 24551	
Purpose of Disbursement PAC DIRECT MAIL PRODUCTION	<div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	
Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 300px; height: 30px; margin: 0 auto; text-align: center; padding-top: 5px;">3814.28</div>	

C. Full Name (Last, First, Middle Initial) SPRINT	Transaction ID: SB21B.48911 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div><small>1</small> <small>1</small> / <small>2</small> <small>3</small> / <small>2</small> <small>0</small> <small>1</small> <small>0</small></div> </div>
Mailing Address P.O. BOX 530503	
City ATLANTA	State GA
Zip Code 30353	
Purpose of Disbursement TELEPHONE	<div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	
Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 300px; height: 30px; margin: 0 auto; text-align: center; padding-top: 5px;">27.70</div>	

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 130 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) SPRINT	Transaction ID: SB21B.48930 Date of Disbursement																				
Mailing Address P.O. BOX 530503	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	8		2	0	1	0												
City ATLANTA State GA Zip Code 30353	Amount of Each Disbursement this Period																				
Purpose of Disbursement TELEPHONE	<table border="1"> <tr> <td colspan="10">23.50</td> </tr> </table>	23.50																			
23.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) THE LUKENS COMPANY	Transaction ID: SB21B.48931 Date of Disbursement																				
Mailing Address 2800 SHIRLINGTON ROAD #900	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	8		2	0	1	0												
City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC DIRECT MAIL CONSULTING	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) U.S. POSTMASTER	Transaction ID: SB21B.48914 Date of Disbursement																				
Mailing Address MAIN POST OFFICE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	7		2	0	1	0												
City WASHINGTON State DC Zip Code 20000	Amount of Each Disbursement this Period																				
Purpose of Disbursement GENERAL OFFICE POSTAGE	<table border="1"> <tr> <td colspan="10">256.00</td> </tr> </table>	256.00																			
256.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1779.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 131 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

VERIZON

Mailing Address P.O. BOX 17577

City
BALTIMORE

State
MD

Zip Code
21297

Purpose of Disbursement
TELEPHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48912

Date of Disbursement

/ /

Amount of Each Disbursement this Period

432.30

B.

Full Name (Last, First, Middle Initial)

VERIZON

Mailing Address P.O. BOX 17577

City
BALTIMORE

State
MD

Zip Code
21297

Purpose of Disbursement
TELEPHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48932

Date of Disbursement

/ /

Amount of Each Disbursement this Period

426.07

C.

Full Name (Last, First, Middle Initial)

DEAN VIRAG

Mailing Address 14039 WESTWIND LANE

City
CULPEPER

State
VA

Zip Code
22701

Purpose of Disbursement
WEBSITE SUPPORT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.48916

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1358.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 132 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City
CHANTILLY

State
VA

Zip Code
20151

Purpose of Disbursement
PAC - CAGING AND DATA ENTRY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.48913

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1198.08

B.

Full Name (Last, First, Middle Initial)

WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City
CHANTILLY

State
VA

Zip Code
20151

Purpose of Disbursement
PAC CAGING AND DATA ENTRY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.48936

Date of Disbursement

/ /

Amount of Each Disbursement this Period

976.71

SUBTOTAL of Disbursements This Page (optional)

2174.79

TOTAL This Period (last page this line number only)

40791.36

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 133 / 142

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

CAMPAIGN FOR WORKING FAMILIES

Mailing Address 2800 Shirlington Road, Suite 930

City
Arlington

State
VA

Zip Code
22206

Purpose of Disbursement

TRANSFER TO NON-FED ACCOUNT EXCESS MOREY ORIG CONTIB 10/22/10

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB22.48941

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)

100.00

TOTAL This Period (last page this line number only)

100.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 134 / 142

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
DESIGN 4 INC.Nature of Debt (Purpose):
BUMPER STICKERS

Mailing Address 106 N. Collins Street

City State ZIP Code
Plant City FL 33563

Outstanding Balance Beginning This Period

1460.00

Transaction ID: SD10.48553

Amount Incurred This Period

0.00

Payment This Period

1460.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DIRECTECHNature of Debt (Purpose):
CAGING AND DATA PROCESSING

Mailing Address 8595 GROVEMONT CIRCLE

City State ZIP Code
GAITHERSBURG MD 20877

Outstanding Balance Beginning This Period

223.11

Transaction ID: SD10.4694

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

223.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPSNature of Debt (Purpose):
PAC - DATA PROCESSING SER-
VICES

Mailing Address P.O. BOX 2325

City State ZIP Code
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

539.29

Transaction ID: SD10.48554

Amount Incurred This Period

0.00

Payment This Period

539.29

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

223.11

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 135 / 142

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPSNature of Debt (Purpose):
PAC - DATA PROCESSING SER-
VICES

Mailing Address P.O. BOX 2325

City State ZIP Code
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

1167.66

Transaction ID: SD10.48555

Amount Incurred This Period

0.00

Payment This Period

1167.66

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPSNature of Debt (Purpose):
PAC DATA PROCESSING SERVI-
CES

Mailing Address P.O. BOX 2325

City State ZIP Code
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.48921

Amount Incurred This Period

587.11

Payment This Period

587.11

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPSNature of Debt (Purpose):
PAC DATA PROCESSING SERVI-
CES

Mailing Address P.O. BOX 2325

City State ZIP Code
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.48933

Amount Incurred This Period

52.41

Payment This Period

52.41

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 136 / 142

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MWM DIRECT MARKETING SERVICES

Nature of Debt (Purpose):
PAC - DIRECT MAIL

Mailing Address 8048 HILLRISE COURT

City State ZIP Code
ELKRIDGE MD 21075

Outstanding Balance Beginning This Period

2320.90

Transaction ID: SD10.4696

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2320.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PR NEWswire

Nature of Debt (Purpose):
PRESS RELEASE

Mailing Address 810 7TH AVE 32ND FL

City State ZIP Code
NEW YORK NY 10019

Outstanding Balance Beginning This Period

195.00

Transaction ID: SD10.48557

Amount Incurred This Period

0.00

Payment This Period

195.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PR NEWswire

Nature of Debt (Purpose):
PRESS RELEASE

Mailing Address 810 7TH AVE 32ND FL

City State ZIP Code
NEW YORK NY 10019

Outstanding Balance Beginning This Period

125.00

Transaction ID: SD10.48556

Amount Incurred This Period

0.00

Payment This Period

125.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

2320.90

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 137 / 142

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
PR NEWSWIRENature of Debt (Purpose):
PRESS RELEASE

Mailing Address 810 7TH AVE 32ND FL

City State ZIP Code
NEW YORK NY 10019

Outstanding Balance Beginning This Period

1430.00

Transaction ID: SD10.48559

Amount Incurred This Period

0.00

Payment This Period

1430.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WASHINGTON INTELLIGENCE BUREAUNature of Debt (Purpose):
PAC - CAGING AND DATA ENT-
RY SERVICES

Mailing Address 4128 PEPSI PLACE

City State ZIP Code
CHANTILLY VA 20151

Outstanding Balance Beginning This Period

1198.08

Transaction ID: SD10.48552

Amount Incurred This Period

0.00

Payment This Period

1198.08

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WASHINGTON INTELLIGENCE BUREAUNature of Debt (Purpose):
PAC CAGING AND DATA ENTRY
SERVICES

Mailing Address 4128 PEPSI PLACE

City State ZIP Code
CHANTILLY VA 20151

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.48935

Amount Incurred This Period

976.71

Payment This Period

976.71

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....

2544.01

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

2544.01

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 139 / 142
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

NAME OF ACCOUNT
 CAMPAIGN FOR WORKI-
 NG FAMILIES

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 1 / 2 3 / 2 0 1 0

TOTAL AMOUNT TRANSFERRED

8875.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

8875.00

Transaction ID: H3.48892

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 140 / 142
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

NAME OF ACCOUNT
 CAMPAIGN FOR WORKI-
 NG FAMILIES

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 2 / 2 7 / 2 0 1 0

TOTAL AMOUNT TRANSFERRED

9375.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

9375.00

Transaction ID: H3.48894

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

18250.00

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

18250.00

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 141 / 142
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial)
GARY BAUER

Mailing Address

2800 SHIRLINGTON ROAD #930

City	State	Zip Code
ARLINGTON	VA	22206

 Purpose of Disbursement:
PAC CONSULTING POLITICAL AND GEN ADMIN
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

189500.00

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	1	0

Transaction ID: H4.48886

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6250.00		6250.00		12500.00

B. Full Name (Last, First, Middle Initial)
BILL MOELLER

Mailing Address

2800 SHIRLINGTON ROAD #930

City	State	Zip Code
ARLINGTON	VA	22206

 Purpose of Disbursement:
PAC CONSULTING POLITICAL RESEARCHER
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

192250.00

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	1	0

Transaction ID: H4.48887

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1375.00		1375.00		2750.00

C. Full Name (Last, First, Middle Initial)
Dorie Velezis

Mailing Address

2800 S. Shirlington Road, #930

City	State	Zip Code
Arlington	VA	22206

 Purpose of Disbursement:
PAC ACCOUNTING SERVICES
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

194750.00

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	1	0

Transaction ID: H4.48888

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1250.00		1250.00		2500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8875.00		8875.00		17750.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial)

GARY BAUER

Mailing Address

2800 SHIRLINGTON ROAD #930

City	State	Zip Code
ARLINGTON	VA	22206

Purpose of Disbursement:	Category/Type
PAC CONSULTING POLITICAL AND GEN ADMIN	

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

208000.00

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	7	/	2	0	1	0

Transaction ID: H4.48889

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6625.00		6625.00		13250.00

B. Full Name (Last, First, Middle Initial)

BILL MOELLER

Mailing Address

2800 SHIRLINGTON ROAD #930

City	State	Zip Code
ARLINGTON	VA	22206

Purpose of Disbursement:	Category/Type
PAC CONSULTING POLITICAL RESEARCHER	

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

210750.00

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	7	/	2	0	1	0

Transaction ID: H4.48890

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1375.00		1375.00		2750.00

C. Full Name (Last, First, Middle Initial)

Dorie Velezis

Mailing Address

2800 S. Shirlington Road, #930

City	State	Zip Code
Arlington	VA	22206

Purpose of Disbursement:	Category/Type
PAC CONSULTING ACCOUNTING SERVICES	

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

213500.00

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	7	/	2	0	1	0

Transaction ID: H4.48891

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1375.00		1375.00		2750.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9375.00		9375.00		18750.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
18250.00	18250.00	36500.00